



**MONTGOMERY COUNTY FIRE AND RESCUE SERVICES
OFFICE OF THE FIRE MARSHAL**

255 Rockville Pike, 2nd Floor
Rockville, Maryland 20850



FIRE ALARM TEMPORARY DESIGNATED QUALIFIED INDIVIDUAL (TDQI) FORM

THIS FORM IS FOR BUSINESSES WITH RESTRICTED FIRE ALARM LICENSES. THIS FORM MUST BE COMPLETED AND PRESENTED TO THE FIRE MARSHALS OFFICE FOR APPROVAL PRIOR TO EVERY FIRE ALARM PERMIT.

Company Information:

Company Name: _____

Company Fire Alarm License Number: _____

Contact Name: _____ Contact Phone: _____

TDQI Information:

TDQI Name: _____ Signature: _____

Corporate Fire Alarm License Number _____

Phone: _____ Date: _____

The DQI must be previously approved by our office under a corporate license with the Installation Endorsement

Project Information:

Project Name: _____

Project Address: _____

Brief description of work to be done:

FOR OFFICE USE ONLY

FM APPROVAL: _____

DPS PERMIT NUMBER: _____